

# Work Order ID 62755

Thursday, October 07, 2010 3:10:18 PM

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Item ID: D206-642-511

Revision ID:

Item Name: Float Skidtube LH

Start Date: 10/7/2010 Start Qty: 1.00

Required Date: 10/15/2010 Req'd Qty: 1.00


Reference:

Approvals: Process Plan: H Date: 10/10/10 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start   
Stop 

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
INN-D206-642	Rev M

100	DOCUMENT CONTROL	0.00							
									
DC	Memo	0.00							
Document Control	Photocopy bluefile and create labels per PPP D206-642-511CHG004								

10 12 10 10 10

110	Pick Kit	0.00							
									
Packaging	Memo	0.00							
Packaging									

10 12 10 10 10

120	QC4- 100% Inspect kits for completeness	0.00							
									
QC	Memo	0.00							
Quality Control									

10 12 10 10 10

363375

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

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Item ID: D206-642-511

Accept

Revision ID:

Item Name: Float Skidtube LH

Start Date: 10/7/2010 Start Qty: 1.00

Required Date: 10/15/2010 Req'd Qty: 1.00

Reference:

Cust Item ID:

Customer:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start

Stop

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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130



Packaging

Packaging

0.00

Memo

0.00

Identify and pack for shipping as per PPP D206-642-511

Location: \_\_\_\_\_

*RE*

140



QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

Memo

0.00

*10/12/10**10/12/13**MF 10-12-10*

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Picklist Print

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Work Order ID: 62755



Parent Item: D206-642-511



Parent Item Name: Float Skidtube LH

Start Date: 10/7/2010

Required Date: 10/15/2010

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:B 05.09.23 Revised per D206-642 Rev. J KJ/JLM  
 IPP Rev:C 07-02-23 As per IIN D206-642 Rev K JLM  
 IPP rev D 07.06.06 added K642-511 EC  
 IPP Rev:E 07-12-05 ECN 1080p Rev L DD verified by:

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D206-642-541  Replacement Skidtube		Manufactured	No			120	Each	1.0000	1	1			
					<u>Location</u> FG073				<u>Loc Qty</u> 1				
					34772				1				
K642-511  saddle kit 642-511		Manufactured	No			120	Each	0.0000	1	1			

63375  
 64172  
 10/12/10

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries